

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	CH	1115	10-03-01
RESPONSE FORMALITY REVIEW	CK	1109	12-07-01

BEST AVAILABLE COPY

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral) ... Canceled A ..... Appeal  
 - ..... Restricted 0 ..... Objected

Claim	Date
1	1-8-01
2	3-18-01
3	4-18-01
4	5-18-01
5	6-18-01
6	7-18-01
7	8-18-01
8	9-18-01
9	10-18-01
10	11-18-01
11	12-18-01
12	1-18-02
13	2-18-02
14	3-18-02
15	4-18-02
16	5-18-02
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18	7-18-02
19	8-18-02
20	9-18-02
21	10-18-02
22	11-18-02
23	12-18-02
24	1-18-03
25	2-18-03
26	3-18-03
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29	6-18-03
30	7-18-03
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32	9-18-03
33	10-18-03
34	11-18-03
35	12-18-03
36	1-18-04
37	2-18-04
38	3-18-04
39	4-18-04
40	5-18-04
41	6-18-04
42	7-18-04
43	8-18-04
44	9-18-04
45	10-18-04
46	11-18-04
47	12-18-04
48	1-18-05
49	2-18-05
50	3-18-05

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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617  
12-10-01

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